B6 Summary (Official Form Case: 14-10071 Document: 27 Filed: 05/29/14 Page 1 of 43

United States Bankruptcy Court District of South Dakota

| IN RE: | | Case No. <u>14-10071</u> |
|---------------------|-----------|--------------------------|
| Hansen, Randal Kent | | Chapter 11 |
| , | Debtor(s) | 1 |

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE | ATTACHED (YES/NO) | NO. OF SHEETS | ASSETS | LIABILITIES | OTHER |
|------------------------------------------------------------------------------------|----------------------|------------------|---------------|-----------------|--------------|
| A - Real Property | Yes | 1 | \$ 0.00 | | |
| B - Personal Property | Yes | 3 | \$ 453,451.49 | | |
| C - Property Claimed as Exempt | Yes | 1 | | | |
| D - Creditors Holding Secured Claims | Yes | 1 | | \$ 100,000.00 | |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes | 2 | | \$ 700,000.00 | |
| F - Creditors Holding Unsecured Nonpriority Claims | Yes | 14 | | \$ 3,548,700.00 | |
| G - Executory Contracts and Unexpired Leases | Yes | 1 | | | |
| H - Codebtors | Yes | 1 | | | |
| I - Current Income of Individual Debtor(s) | Yes | 3 | | | \$ 28,837.37 |
| J - Current Expenditures of Individual Debtor(s) | Yes | 4 | | | \$ 28,113.41 |
| | TOTAL | 31 | \$ 453,451.49 | \$ 4,348,700.00 | |

B 6 Summary (Official Form Case: 14-10071 Document: 27 Filed: 05/29/14 Page 2 of 43

United States Bankruptcy Court District of South Dakota

| IN RE: | | Case No. <u>14-10071</u> |
|---------------------|-----------|--------------------------|
| Hansen, Randal Kent | | Chapter 11 |
| | Debtor(s) | • |

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

✓ ☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability | Amount |
|---------------------------------------------------------------------------------------------------------------------|--------|
| Domestic Support Obligations (from Schedule E) | \$ |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) | \$ |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | \$ |
| Student Loan Obligations (from Schedule F) | \$ |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E | \$ |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F) | \$ |
| TOTAL | \$ |

State the following:

| Average Income (from Schedule I, Line 12) | \$ 0.00 |
|---------------------------------------------------------------------------------------------------|------------|
| Average Expenses (from Schedule J, Line 22) | \$ |
| Current Monthly Income (from Form 22A Line 12; OR , Form 22B Line 11; OR , Form 22C | |
| Line 20) | \$ |

State the following:

| 1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column | \$ |
|----------------------------------------------------------------------------|----|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column. | \$ |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column | \$ |
| 4. Total from Schedule F | \$ |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4) | \$ |

| B6A (Official Form 6A) (12/07) ase: 14-10071 | Document: 27 | Filed: 05/29/14 | Page 3 of 4 |
|----------------------------------------------|--------------|-----------------|-------------|
| DOA (UJIJICIAI FORIII OA) (12/07) | | | |

Debtor(s)

Case No. 14-10071

(If known)

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| DESCRIPTION AND LOCATION OF PROPERTY | NATURE OF DEBTOR'S INTEREST IN PROPERTY | HUSBAND, WIFE, JOINT, OR COMMUNITY | CURRENT VALUE OF DEBTORS INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION | AMOUNT OF SECURED CLAIM |
|--------------------------------------|--------------------------------------------|---------------------------------------|---------------------------------------------------------------------------------------------------------------|----------------------------|
| None | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

TOTAL

0.00

(Report also on Summary of Schedules)

Case No. 14-10071

Debtor(s)

(If known)

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

| | TYPE OF PROPERTY | N O N E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT, OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
|-----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|----------------------------------------------------------------------------------------------------------------|
| 1. | Cash on hand. | | Cash on hand | | 500.00 |
| 2. | Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | | Checking @ Great Western Bank, Sioux Falls, SD \$3,256.65; 1/2 interest w/ nonfiling Spouse in joint checking @ Great Western Bank, Sioux Falls, SD \$1,760.48 Securities account w/ Ameritrade \$49,270.12; Health Savings Account (JT w/ nonfiling Spouse) \$6,228.28 | | 60,515.53 |
| 3. | Security deposits with public utilities, telephone companies, landlords, and others. | Х | | | |
| 4. | Household goods and furnishings, include audio, video, and computer equipment. | | 1/2 interest in safe \$1,000 (Debtor's 1/2 value listed & reflected); 2 computers \$500 | | 1,500.00 |
| 5. | Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. | Х | | | |
| 6. | Wearing apparel. | | Wearing apparel & jewelry worn habitually | | 1,000.00 |
| 7. | Furs and jewelry. | Х | | | |
| 8. | Firearms and sports, photographic, and other hobby equipment. | | Golf clubs \$200; Ruger 22 pistol \$1,100 | | 1,300.00 |
| 9. | Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. | | Whole life insurance policy through Thrivent (cash value listed) \$20,000; Adjustable Life Insurance policy through Thrivent (no cash value) | | 20,000.00 |
| 10. | Annuities. Itemize and name each issue. | Х | | | |
| 11. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | X | | | |
| 12. | Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars. | | IRA through Ameritrade | | 37,341.08 |
| | | | | | |

____ Case No. 14-10071

Debtor(s)

(If known)

${\bf SCHEDULE~B~-PERSONAL~PROPERTY}$

(Continuation Sheet)

| | TYPE OF PROPERTY | N O N E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT, OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
|-----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|----------------------------------------------------------------------------------------------------------------|
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize. | | 49% membership interest in H. Family, Inc. \$150,000; 33.33% membership interest in Hansen Managment, LLC \$0; 1% membership interest in Hansen Holdings, LP \$50,000 33% membership interest in Hansen Rentals, LLC \$51,000; interest in DOMOCO A&B Holdings \$1; interest in Pioneer Prospects, LLP \$1; 1/4 interest in TJRS \$0 interest in Pioneer Energy SD, LLC \$1; Capital account in United Operating, LLC (negative net worth) 100% membership interest in Xurex \$1,000; 100% membership interest in KBS \$1,500; 50% membership interest in Great Plains \$1 | | 254,670.88 |
| 14. | Interests in partnerships or joint ventures. Itemize. | | Debtor has stock in James Valley Ethanol H Family, Inc. has 1/3 interest in a partnership in Tripe R Farms (Debtor's interest reflected) | | 60,000.00 |
| 15. | Government and corporate bonds and other negotiable and non-negotiable instruments. | x | (2000) | | |
| 16. | Accounts receivable. | X | | | |
| | Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars. | Х | | | |
| 18. | Other liquidated debts owed to debtor including tax refunds. Give particulars. | X | | | |
| 19. | Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property. | X | | | |
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. | | Potential cause of action against Hudson Capital & Vincent Puma | | unknown |
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | X | | | |
| 22. | Patents, copyrights, and other intellectual property. Give particulars. | X | | | |
| 23. | Licenses, franchises, and other general intangibles. Give particulars. | X | | | |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X | | | |
| | | | | | |

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Case No. 14-10071

Debtor(s)

(If known)

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

| 25. | TYPE OF PROPERTY Automobiles, trucks, trailers, and | N O N E | DESCRIPTION AND LOCATION OF PROPERTY 1/2 interest w/ nonfiling Spouse in Toyota Highlander (95,000 | HUSBAND, WIFE, JOINT, OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION 7,374.00 |
|-----|--------------------------------------------------------------------------|------------------|-----------------------------------------------------------------------------------------------------|---------------------------------------|-----------------------------------------------------------------------------------------------------------|
| 26 | other vehicles and accessories. | x | miles) (Kelly Blue Book value listed) \$14,748 (Debtor's 1/2 interest reflected to the right) | | |
| | Boats, motors, and accessories. | X | | | |
| | Aircraft and accessories. Office equipment, furnishings, and supplies. | | Copiers & ink cartridges | | 100.00 |
| 29. | Machinery, fixtures, equipment, and supplies used in business. | Х | | | |
| 30. | Inventory. | X | | | |
| | Animals. | X | | | |
| | Crops - growing or harvested. Give particulars. | X | | | |
| | Farming equipment and implements. | X | | | |
| | Farm supplies, chemicals, and feed. Other personal property of any kind | X | Check for approx. \$9,000 from cashed in life insurance policy | | 9,000.00 |
| | not already listed. Itemize. | | Misc. handheld tools, garage items, etc. | | 150.00 |
| | | | TO | TAL | 453,451.49 |

0 continuation sheets attached

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

| | | _ | | |
|------|--------|---------|--------|-----|
| IN R | H: Han | isen. F | ≀andal | Ken |

_____ Case No. 14-10071

Debtor(s)

(If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemptions to which debtor is entitled under: (Check one box)

Check if debtor claims a homestead exemption that exceeds \$155,675. *

11 U.S.C. § 522(b)(2) 11 U.S.C. § 522(b)(3)

| DESCRIPTION OF PROPERTY | SPECIFY LAW PROVIDING EACH EXEMPTION | VALUE OF CLAIMED EXEMPTION | CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------|--------------------------------------------------------|
| SCHEDULE B - PERSONAL PROPERTY | | | |
| Cash on hand | SDCL § 43-45-4 | 500.00 | 500.00 |
| Checking @ Great Western Bank, Sioux Falls, SD \$3,256.65; 1/2 interest w/ nonfiling Spouse in joint checking @ Great Western Bank, Sioux Falls, SD \$1,760.48 Securities account w/ Ameritrade \$49,270.12; Health Savings Account (JT w/ nonfiling Spouse) \$6,228.28 | SDCL § 43-45-4 | 3,450.00 | 60,515.53 |
| 1/2 interest in safe \$1,000 (Debtor's 1/2 value listed & reflected); 2 computers \$500 | SDCL § 43-45-4 | 1,500.00 | 1,500.00 |
| Wearing apparel & jewelry worn habitually | SDCL § 43-45-2 (5) | 1,000.00 | 1,000.00 |
| Golf clubs \$200; Ruger 22 pistol \$1,100 | SDCL § 43-45-4 | 1,300.00 | 1,300.00 |
| Whole life insurance policy through Thrivent (cash value listed) \$20,000; Adjustable Life Insurance policy through Thrivent (no cash value) | SDCL § 58-12-4 | 20,000.00 | 20,000.00 |
| IRA through Ameritrade | SDCL § 43-45-16 | 37,341.08 | 37,341.08 |
| Copiers & ink cartridges | SDCL § 43-45-4 | 100.00 | 100.00 |
| | | | |

^{*} Amount subject to adjustment on 4/1/16 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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IN RE Hansen, Randal Kent

Case No. 14-10071

Debtor(s)

(If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| | | | | _ | _ | | | |
|------------------------------------------------------------------------------------------------------------|----------|---------------------------------------|------------------------------------------------------------------------------------------------------|------------|--------------|----------|-------------------------------------------------------------------|------------------------------|
| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
| ACCOUNT NO. | Х | | Security interest in all property own by H. | | | | 100,000.00 | 40,000.00 |
| Farmers & Merchants Branch of First National Bank P.O. Box 848 Huron, SD 57350 | | | Family, Inc. & Security interest in Ethanol Stock | | | | | |
| 7101011, 05 37 330 | | | VALUE \$ 60,000.00 | 1 | | | | |
| ACCOUNT NO. | | | WALKER & | | | | | |
| ACCOUNT NO. | | | VALUE \$ | | | | | |
| | | | VALUE \$ | | | | | |
| ACCOUNT NO. | | | | | | | | |
| | | | VALUE \$ | Sul | otota | ıl | | |
| ocntinuation sheets attached | | | (Total of the | is p | age Fota | e) al | \$ 100,000.00 \$ 100,000.00 | - |
| | | | (Use only on la | st Į | age | | (Report also on | (If applicable, report |

(Report also on Summary of Schedules.)

(If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

 ${}_{B6E\,(Official\,Form\,6E)\,(04/1S)} ase:\,14\text{-}10071\quad Document:\,27\quad Filed:\,05/29/14\quad Page\,\,9\,\,of\,\,43$

IN RE Hansen, Randal Kent

1 continuation sheets attached

_____ Case No. **14-1007**1

Debtor(s)

(If known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data. © 1993-2011 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) **Domestic Support Obligations** Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3). Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5). Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). **Deposits by individuals** Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7). **▼** Taxes and Certain Other Debts Owed to Governmental Units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8). Commitments to Maintain the Capital of an Insured Depository Institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9). Claims for Death or Personal Injury While Debtor Was Intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Debtor(s)

(If known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Taxes and Other Certain Debts Owed to Governmental Units

(Type of Priority for Claims Listed on This Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM | AMOUNT ENTITLED TO PRIORITY | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---------------------------------------------------------------------------------------------------------|--------------|---------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|---------------------|----------|-----------------------|--------------------------------------|--------------------------------------------------------|
| ACCOUNT NO. | † | | claim for taxes taken on | х | Х | Х | | | |
| Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101-7346 | | | investors | | | | 700,000.00 | 700,000.00 | |
| ACCOUNT NO. | - | | | | | | | | |
| ACCOUNT NO. | - | | | | | | | | |
| ACCOUNT NO. | - | | | | | | | | |
| ACCOUNT NO. | - | | | | | | | | |
| ACCOUNT NO. | - | | | | | | | | |
| Sheet no1 of1 continuation sheets Schedule of Creditors Holding Unsecured Priority | att Cl | ached aims | to (Totals of th | | tota age Fota | e) | \$ 700,000.00 | \$ 700,000.00 | \$ |
| | | | led the second of the second o | nedu T | ıles. Γota | .) al | \$ 700,000.00 | | |
| (Us | | | last page of the completed Schedule E. If apple | | | | | \$ 700 000 00 | ¢ |

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IN RE Hansen, Randal Kent

Case No. 14-10071

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|----------------------------------------------------------------------------------------------------------|----------|---------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|---------------------|---------------|-----------------------|
| ACCOUNT NO. | | | Attorneys for Michael Miller and Lucky Guy, LLC | | | | |
| Abdallah, Scott Falon, Shannon P.O. Box 2348 Sioux Falls, SD 57101-2348 | | | | | | | 0.00 |
| ACCOUNT NO. | | | | \Box | | х | 0.00 |
| Abdullah, Ahmed 2043 Rose Credk Blvd. S Fargo, ND 58104 | | | | | | | |
| ACCOUNT NO. | | | | H | | X | unknown |
| Abdullah, Kay 2034 Rose Creek Blvd. S Fargo, ND 58104 | | | | | | | |
| ACCOUNT NO. | | | | H | | X | unknown |
| Allen, Paul 16 Birch Brook Road Courtlandt Manor, NY 10567 | | | | | | | |
| | | | | | | Ц | unknown |
| 13 continuation sheets attached | | | (Total of th | Subtais pa | | | \$ |
| | | | (Use only on last page of the completed Schedule F. Repor the Summary of Schedules and, if applicable, on the S Summary of Certain Liabilities and Relate | T t also tatis | ota o oi tica | ıl n ıl | \$ |

___ Case No. 14-10071

(If known)

Debtor(s)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| | | • | • | | | | |
|----------------------------------------------------------------------------------------------------------|----------|---------------------------------------|----------------------------------------------------------------------------------------------------------------------|-------------|--------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
| ACCOUNT NO. | | | | П | | Х | |
| ARC 12 Miller Road Putnam Valley, NY 10579 | • | | | | | | unknown |
| A COOLINE NO | | | | H | | Х | ulikilowii |
| ACCOUNT NO. Bauste, Wencall 1819 15th Avenue West Williston, ND 58801 | | | | | | | |
| ACCOUNT NO. | | | | H | | Х | unknown |
| Becker, Michael 42338 Russia Road Elyria, OH 44035 | | | | | | | unknown |
| ACCOUNT NO. | | | | Н | | x | unknown |
| Bedford And Associates 507 S. Hiawassee Road, Suite 215 Orlando, FL 32835 | | | | | | | ka aa |
| ACCOUNT NO. | | | | | | X | unknown |
| Bernardo, Pat 25 Furrer Road Albany, NY 12227 | | | | | | | kn an |
| ACCOUNT NO. | | | | | | Х | unknown |
| Boschee, Chris 503 W. Fir Street Parkston, SD 57366 | | | | | | | unknown |
| ACCOUNT NO. | | | | Н | | X | unknown |
| Boyer, Les 2570 Country Road 2028 Arkansas Pass, TX 78336 | | | | | | - | unknows |
| Sheet no. 1 of 13 continuation sheets attached to | | | <u> </u> | Sub | toto | | unknown |
| Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of th | | | | \$ |
| | | | (Use only on last page of the completed Schedule F. Report the Summary of Schedules, and if applicable, on the St | als atis | tica | n ıl | ¢ |

(If known)

Debtor(s)

| | | ((| Continuation Sheet) | | | | |
|----------------------------------------------------------------------------------------------------------|----------|---------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
| ACCOUNT NO. | | | | | | Х | |
| Butz, Charles 2810 169th Avenue SE Harwood, ND 58042 | | | | | | | unknown |
| ACCOUNT NO. | | | | | | Х | ulikilowii |
| Camillio, Dennis 24 Patricia Drive Pleasant Valley, NY 12569 | | | | | | | unknown |
| ACCOUNT NO. | | | | | | Х | ulikilowii |
| Dettler, Aelred 1225 11th Avenue Langdon, ND 58249 | | | | | | | |
| ACCOUNT NO. | | | | | | Х | unknown |
| Dunn, Arthur 9432 Hazel Circle Villa Park, CA 92861 | | | | | | | |
| ACCOUNT NO. | | | | | | Х | unknown |
| Dykstra, Garritt 315 N. Humphrey Avenue Doland, SD 57436 | | | | | | | unknown |
| ACCOUNT NO. | | | | Н | | Х | ulikilowii |
| Eisele, Barbara 130 Commodore Dupont Street Bluffton, SC 29910 | - | | | | | | |
| | | | | Ц | | | unknown |
| ACCOUNT NO. | | | | | | Х | |
| Eisele, William 14 Faxfiled Lane Blythewood, SC 29016 | | | | | | | |
| Sheet no. 2 of 13 continuation sheets attached to | L | | <u> </u> | Subt | ota | | unknown |
| Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of th | is pa | age | ;) | \$ |
| | | | (Use only on last page of the completed Schedule F. Report the Summary of Schedules, and if applicable, on the St Summary of Certain Liabilities and Related | also atist | tica | n al | \$ |

____ Case No. <u>14-10071</u>

Debtor(s)

(If known)

| | | ((| Continuation Sneet) | | | | |
|----------------------------------------------------------------------------------------------------------|----------|---------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
| ACCOUNT NO. | | | | | | Х | |
| Eldridge, Ron 1286 E. Horsehow Avenue Gilbert, AZ 85233 | | | | | | | unknown |
| ACCOUNT NO. | | | | | | Х | |
| Evangelos Vourliotis Rev Trust 333 N. State Road Briarcliff Manor, NY 10510 | | | | | | | unknown |
| ACCOUNT NO. | | | | | | Х | dikilowii |
| Fellman, Thomas 50 Prairiewood Drive Fargo, ND 58104 | | | | | | | unka awa |
| ACCOUNT NO. | | | | | | Х | unknown |
| Ferrier, L. Norman 201 S. Berry Pine Road Rapid City, SD 57701 | | | | | | | unknown |
| ACCOUNT NO. | | | | | | Х | ulikilowii |
| Fiederlein, David & Barbara 56 Majestic Ridge Caramel, NY 10512 | | | | | | | unknown |
| ACCOUNT NO. | | | | | | Х | unknown |
| Flanigan, Rick 4408 SW 35th Avenue Ft. Lauderdale, FL 33312 | | | | | | | |
| ACCOUNT NO. | | | | L | | Х | unknown |
| Flaten, Dennis | 1 | | | | | ^ | |
| 208 13th Avenue Langdon, ND 58249 | | | | | | | unknown |
| Sheet no. 3 of 13 continuation sheets attached to | | | <u> </u> | L Sub | tota | L al | unknown |
| Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of th | is p | age | e) | \$ |
| | | | (Use only on last page of the completed Schedule F. Report the Summary of Schedules, and if applicable, on the St Summary of Certain Liabilities and Relate | als atis | tica | n al | \$ |

Debtor(s)

(If known)

| | | (• | Continuation Sheet) | | | | |
|--------------------------------------------------------------------------------------------------------------|----------|---------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|----------------------------|---------------------|------------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
| ACCOUNT NO. | | | | П | | Х | |
| Freadrich, Jeffrey 194 N. Kimette Saint George, UT 84770 | | | | | | | unknown |
| ACCOUNT NO. | | | | Н | | Х | dikilowii |
| Freeland, Keith 1928 Queensbury Street West Fargo, ND 58078 | - | | | | | | unka ava |
| ACCOUNT NO. | | | | | | Х | unknown |
| Fritz, Gary 99 Prairiewood Dr SW Fargo, ND 58104 | | | | | | | |
| ACCOUNT NO. | | | | H | | Х | unknown |
| Geist, Doug & Diane 4055 N. Recker #84 Mesa, AZ 85201 | | | | | | | |
| ACCOUNT NO. | | | | | | Х | unknown |
| Getter, Joe 9970 Highway 18 Lidgerwood, ND 58053 | | | | | | ^ | |
| ACCOUNT NO. | | | | | | Х | unknown |
| Gilbertson, Merle 2319 25th Avenue S Fargo, ND 58104 | | | | | | | |
| | | | | Ш | | | unknown |
| ACCOUNT NO. | X | | Unsecured Personal Guaranty | | | | |
| Great Western 106 E. 7th Avenue Redfield, SD 57469 | | | | | | | |
| | | | | Ц | | Ļ | 3,000,000.00 |
| Sheet no. 4 of 13 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of th (Total of th (Use only on last page of the completed Schedule F. Report the Summary of Schedules, and if applicable, on the St Summary of Certain Liabilities and Relate | T als | age Fota o o tica | e) al n al | \$ 3,000,000.00 |

Debtor(s)

(If known)

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| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
| ACCOUNT NO. | | | | | | Х | |
| Hager, David 2775 Hwy 3 NE Harvey, ND 58341 | | | | | | | unknown |
| ACCOUNT NO. | | | | | | Х | |
| Hager, Lori 808 Hardwood Drive Fargo, ND 58104 | | | | | | | unknown |
| ACCOUNT NO. | | | | | | | ulikilowii |
| Hansen, Justin 3829 E. 36th Street Sioux Falls, SD 57103 | - | | | | | | 75,000.00 |
| ACCOUNT NO. | | | | | | | 75,000.00 |
| Hansen-Leinen, Tara 3515 E. Braeburn Circle Sioux Falls, SD 57103 | | | | | | | |
| ACCOUNT NO. | | | | | | Х | 75,000.00 |
| Hilde, Barbara 17540 SE 292nd Place Kent, WA 98030 | - | | | | | | |
| ACCOUNT NO. | | | | | | Х | unknown |
| Hilde, Robin 17540 SE 292nd Place Kent, WA 98030 | - | | | | | ^ | |
| | L | | | | | V | unknown |
| ACCOUNT NO. | 1 | | | | | X | |
| Jacob, George 120 East 34 Street, Apt. 10K New York, NY 10016 | | | | | | | unknown |
| Sheet no. <u>5</u> of <u>13</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | [(Total of th | L Sub is p | | | \$ 150,000.00 |
| o moenie o m | | | (Use only on last page of the completed Schedule F. Report the Summary of Schedules, and if applicable, on the St Summary of Certain Liabilities and Related | als atis | Γota o o tica | al n al | \$ |

Debtor(s)

(If known)

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| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
| ACCOUNT NO. | | | | | | х | |
| Jensen, Darrel 152 E. 2nd Street Box 350 Redfield, SD 57469 | | | | | | | unknown |
| ACCOUNT NO. | | | | | | Х | unknown |
| Johnson, Robert 2326 Depeyster Drive Courtlandt Manor, NY 10567 | | | | | | | unknown |
| ACCOUNT NO. | | | | | | Х | unknown |
| Johnson, Susan 5732 Midway Drive Huntington Beach, CA 92648 | | | | | | | unknown |
| ACCOUNT NO. | | | | | | Х | <u> </u> |
| Keller, James 6940 Boneta Road Medina, OH 44256 | | | | | | | unknown |
| ACCOUNT NO. | | | | | | Х | unknown |
| Kemnitz, Dorayn 298 Grace Point Court Wayzata, MN 55391 | | | | | | | |
| ACCOUNT NO. | | | | | | X | unknown |
| Kerins, Tom 4634 E. Narrowleaf Drive Gilbert, AZ 85298 | | | | | | | |
| | | | Attantion for Ossa Kreek Observe Theless and Laure | | | | unknown |
| ACCOUNT NO. Kooistra, Stacy Morgans, Steven P.O. Box 1085 Sioux Falls, SD 57101-1085 | | | Attorneys for Greg Krech, Shawn Thelen and Lone Valley, LLC | | | | |
| Sheet no. 6 of 13 continuation sheets attached to | | | | Subt | tota | | 0.00 |
| Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of the (Use only on last page of the completed Schedule F. Report | is pa T also | age Ota | e) al n | \$ |
| | | | the Summary of Schedules, and if applicable, on the St Summary of Certain Liabilities and Related | atist I Da | tica ata. | al .) | \$ |

Debtor(s)

(If known)

| | | ((| Continuation Sheet) | | | | |
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| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
| ACCOUNT NO. | | | | | | х | |
| Kosloske, William 11326 E. Meseto Circle Mesa, AZ 85209 | | | | | | | unknown |
| ACCOUNT NO. | | | | | | Х | unknown |
| Krasner, Steven & Alison 759 Longhill Road Briarcliff Manor, NY 10510 | | | | | | | unknown |
| ACCOUNT NO. | | | | | | Х | unknown |
| Krech, Greg 461 Broadland Creek Court Huron, SD 57350 | | | | | | | unknaum |
| ACCOUNT NO. | | | | | | Х | unknown |
| Labrie, Mark 17275 SD Hwy 37 Frankfort, SD 57440 | | | | | | | |
| ACCOUNT NO. | | | | | | Х | unknown |
| Langston-Williams Law Corp. 1852 Holly Tree Lance Santa Ana, CA 92705 | | | | | | | unknown |
| ACCOUNT NO. | | | | | | Х | unknown |
| Lettellier, Roy 4994 Charro Way Mesa, AZ 85935 | | | | | | | |
| | | | | | | | unknown |
| ACCOUNT NO. Lone Valley, LLC C/O Garritt Dykstra 315 N. Humphrey Avenue Doland, SD 57436 | | | | | | X | unknown |
| Sheet no. 7 of 13 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Yorkal of th | Sub is n | | | \$ |
| Senerale of Cications froming Chisconica (vonpriority Ciatilis | | | (Use only on last page of the completed Schedule F. Report the Summary of Schedules, and if applicable, on the St Summary of Certain Liabilities and Related | T also atis | ota o o tica | al n al | \$ |

(If known)

Debtor(s)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| | | • | • | | | | |
|------------------------------------------------------------------------------------------------------------|----------|---------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------------|--------------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
| ACCOUNT NO. | | | | | | х | |
| Lucky Guy, LLC C/O Scott Abdallah P.O. Box 2348 Sioux Falls, SD 57101-2348 | | | | | | | unknown |
| ACCOUNT NO. | | | | | | х | |
| Malisse, Chris 8 Westchester Plaza Elmsford, NY 10523 | • | | | | | | unknown |
| ACCOUNT NO. | | | | T | | х | unknown |
| Martin, Ralph 604 18th Street NW Minot, ND 58701 | | | | | | | unknown |
| ACCOUNT NO. | | | | Н | | х | ulikilowii |
| McCallum Limited Partnership 3515 E. Braeburn Circle Sioux Falls, SD 57103 | | | | | | | unka avan |
| ACCOUNT NO. | | | | | | Х | unknown |
| McCaslin, Jerry 2525 Liberty Landing Liberty, MO 64068 | | | | | | | |
| ACCOUNT NO. | | | | \vdash | | Н | unknown |
| McGladry 110 S. Phillips Avenue, Suite 300 Sioux Falls, SD 57104 | | | | | | | |
| ACCOVINENC | | | | | | Х | 1,200.00 |
| ACCOUNT NO. Mildred Williams Trust | | | | | | $ \hat{\ } $ | |
| 3136 Groveland Drive Sioux Falls, SD 57110 | | | | | | | _ |
| Sheet no. 8 of 13 continuation sheets attached to | | | | Sub | toto | | unknown |
| Sheet no. Or IS continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of the | is p | |) | \$ 1,200.00 |
| | | | (Use only on last page of the completed Schedule F. Repor the Summary of Schedules, and if applicable, on the S Summary of Certain Liabilities and Relate | als atis | o o tica | n al | \$ |

____ Case No. 14-10071

Debtor(s)

(If known)

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| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
| ACCOUNT NO. | | | | | | Х | |
| Miller, Mike P.O. Box 88003 Sioux Falls, SD 57109 | | | | | | | unknown |
| ACCOUNT NO. | | | | | | Х | |
| Myerhoff, Allen 2750 Swann Way Davidsonville, MD 21035 | | | | | | | unknown |
| ACCOUNT NO. | | | | | | Х | unknown |
| O'Brein, William III 6672 Gilbert Place Shreveport, LA 71106 | | | | | | | unknown |
| ACCOUNT NO. | | | | | | Х | ulikilowii |
| Pesavento, David 19203 Santa Suzanne Street Fountain Valley, CA 92708 | | | | | | | unknown |
| ACCOUNT NO. | | | | | | Х | ulikilowii |
| Peterson, David 11823 Maple Lake Drive SE Mentor, MN 56736 | | | | | | | unknown |
| ACCOUNT NO. | | | | | | Х | dikilowii |
| Pray, Robert 12975 Yorkville Road Groton, SD 57445 | | | | | | | |
| L GGOVINTA VO | \vdash | | | L | | v | unknown |
| ACCOUNT NO. Preston, Jeff | - | | | | | X | |
| 702 6th Avenue NE Hillsboro, ND 58045 | | | | | | | |
| Sheet no. 9 of 13 continuation sheets attached to | | | | Sub | tots | L al | unknown |
| Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of th | is p | age | e) | \$ |
| | | | (Use only on last page of the completed Schedule F. Report the Summary of Schedules, and if applicable, on the St Summary of Certain Liabilities and Related | als atis | tica | n al | \$ |

_ Case No. 14-10071

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| | | ((| Continuation Sheet) | | | | |
|---------------------------------------------------------------------------------------------------------------|----------|---------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|---------------------------|---------------------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
| ACCOUNT NO. | | | | | | Х | |
| Reiner, Jared 401 1st Street, Unit 1010 Minneapolis, MN 55401 | | | | | | | unknown |
| ACCOUNT NO. | | | | | | Х | unknown |
| Reiner, Ryan 15124 Hillside Court Omaha, NE 68154 | | | | | | | unknown |
| ACCOUNT NO. | | | | | | Х | unknown |
| Remily, Darrel 16341 400th Avenue Turton, SD 57477 | | | | | | | unka aven |
| ACCOUNT NO. | | | | | | Х | unknown |
| Rodenbiker, Harold 2037 Rose Creek Blvd. Fargo, ND 58104 | | | | | | | unknown |
| ACCOUNT NO. | | | | | | Х | ulikilowii |
| Rose, Dietmar 6624 High Ridge Place NE Albuquerque, NM 87111 | | | | | | | len aven |
| ACCOUNT NO. | | | | | | Х | unknown |
| Rose, Marilyn 6624 High Ridge Place NE Albuquerque, NM 87111 | | | | | | | |
| | - | | | \sqcup | | | unknown |
| ACCOUNT NO. Rossiter, Mark & Christine 9 Granite Springs Road Granit Springs, NY 10527 | | | | | | X | |
| Sheet no. 10 of 13 continuation sheets attached to | | | | Subt | tota | Щ | unknown |
| Sheet no. 10 of 13 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of the (Use only on last page of the completed Schedule F. Report the Summary of Schedules, and if applicable, on the Stammary of Certain Liabilities and Related | is pa T also atist | age Ota o o tica | e) al n al | \$ |

Debtor(s)

(If known)

| | | ((| Continuation Sheet) | | | | |
|------------------------------------------------------------------------------------------------------------|----------|---------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|--------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
| ACCOUNT NO. | | | | | | Х | |
| Schneider, Brent 15869 SD Hwy 37 Turton, SD 57477 | | | | | | | unknown |
| ACCOUNT NO. | | | | \vdash | | Х | unknown |
| Schneider, Gary 16048 SD Hwy 37 Turton, SD 57477 | | | | | | | unknown |
| ACCOUNT NO. | | | | | | Х | unknown |
| Schneider, Patti 15869 SD Hwy 37 Turton, SD 57477 | | | | | | | |
| ACCOUNT NO. | | | | | | Х | unknown |
| Schneider, Sharon 16048 SD Hwy 37 Turton, SD 57477 | | | | | | | unknown |
| ACCOUNT NO. | | | | | | Х | unknown |
| Schneider, Thomas 1945 Rose Creek Pkwy E Fargo, ND 58104 | | | | | | | |
| ACCOUNT NO. | | | Attorney for Skip Frolov, James Keller, Harold | + | | Н | unknown |
| Schulman, Michael 225 Broadhollow Road, Suite 205E Melville, NY 11747 | | | Rodenbiker and Dietmar Rose | | | | |
| | | | | | | | 0.00 |
| ACCOUNT NO. Securities And Exchange Commission 1801 California Street, Suite 1500 Denver, CO 80202-2656 | | | | | | | |
| | | | | | | Ш | 0.00 |
| Sheet no11 of13 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of the | Sub nis p | | - 1 | \$ |
| | | | (Use only on last page of the completed Schedule F. Repor the Summary of Schedules, and if applicable, on the S Summary of Certain Liabilities and Relate | t als tatis | tica | n al | \$ |

(If known)

Debtor(s)

| | | (, | Continuation Sheet) | | | | |
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| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
| ACCOUNT NO. | | | | П | | | |
| Sercarz, Maurice Sercarz & Rioplle, LLP 810 Seventh Avenue, Suite 620 New York, NY 10019 | | | | | | | 14,500.00 |
| ACCOUNT NO. | | | Attorney for Reginald Martin | | | | |
| Siegel, Steven Johnson, Heidepriem & Abdallah, L.L.P. P.O. Box 2348 Sioux Falls, SD 57101-1107 | | | | | | | 0.00 |
| ACCOUNT NO. | | | | Н | | Х | 0.00 |
| Starr, Ronald 40283 US Hwy 212 Doland, SD 57436 | | | | | | | unknown |
| ACCOUNT NO. | | | | | | Х | dikilowii |
| Starr, Ryan 7512 S. Hughes Avenue Sioux Falls, SD 57108 | | | | | | | · |
| ACCOUNTANO | | | | Н | | х | unknown |
| ACCOUNT NO. Stevenson, Scot 7790 E. Tailspin Lane Scottsdale, AZ 85255 | | | | | | ^ | unka aua |
| A COOLINE NO | - | | | Н | | Х | unknown |
| ACCOUNT NO. Steward, Don 15795 372nd Avenue Chelsea, SD 57465 | | | | | | ^ | |
| | | | | Ц | | | unknown |
| ACCOUNT NO. | - | | | | | X | |
| Tellone, Mike & Tamie 1 Hildreth Place Pleasantville, NY 10570 | | | | | | | |
| | | | | | | | unknown |
| Sheet no. 12 of 13 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of th | Sub is p | | | \$ 14,500.00 |
| | | | (Use only on last page of the completed Schedule F. Report the Summary of Schedules, and if applicable, on the St Summary of Certain Liabilities and Relate | als atis | tica | n al | \$ |

(If known)

Debtor(s)

| | | (| Continuation Sheet) | | | | |
|---------------------------------------------------------------------------------------------------------------|----------|---------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|------------------|--------------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
| ACCOUNT NO. | | | | | | х | |
| Thelen, Shawn 527 20th Street SW Huron, SD 57350 | | | | | | | unknown |
| ACCOUNT NO. | | | | | | x | |
| Tysdal, Ralph 123 Doolittle Road Corrales, NM 87048 | | | | | | | unknown |
| ACCOUNT NO. | Х | | Unsecured Personal Guaranty | | | \dashv | ulikilowii |
| Wells Fargo Home Mortgage P.O. Box 10335 Des Moines, IA 50306-0335 | | | , | | | | |
| ACCOUNT NO. | | | | | | X | 383,000.00 |
| Whiteman, Richard 149 Thiefneck Drvie Rockwood, TN 37854 | | | | | | ^ | |
| | | | | | | X | unknown |
| ACCOUNT NO. Williams, Max Box 37 Brentford, SD 57429 | | | | | | ^ | |
| A GGOVINE VO | | | | | | X | unknown |
| ACCOUNT NO. Wipf, Gary 17801 401 Avenue Frankfort, SD 57440 | | | | | | ^ | |
| | | | | | | | unknown |
| ACCOUNT NO. | | | | | | | |
| Sheet no. 13 of 13 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | <u> </u> | (Total of th | Sub | | | \$ 383,000.00 |
| Schedule of Cleditors Holding Unsecured Nonpriority Claims | | | (Total of the Completed Schedule F. Report the Summary of Schedules, and if applicable, on the St Summary of Certain Liabilities and Related | T als atis | ota o o tica | al n | \$ 3,548,700.00 |

| B6G (Official Form 6G) (12 Gase: 14-10071 | Document: 27 | Filed: 05/29/14 | Page 25 of 43 |
|-------------------------------------------|--------------|-----------------|---------------|
| | | | |

Evo (onem 1 vin vo) (im vi)

Debtor(s)

Case No. 14-10071

(If known)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

✓ Check this box if debtor has no executory contracts or unexpired leases.

IN RE Hansen, Randal Kent

B6H (Official Form 6H) (12 (27) Sec. 14-10071 Document: 27 Filed: 05/29/14 Page 26 of 43

IN RE Hansen, Randal Kent

Case No. 14-10071

Debtor(s)

(If known)

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

| NAME AND ADDRESS OF CODEBTOR | NAME AND ADDRESS OF CREDITOR |
|------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|
| H. Family, Inc. 3229 S. Nic Ann Court Sioux Falls, SD 57103 | Great Western 106 E. 7th Avenue Redfield, SD 57469 |
| | Farmers & Merchants Branch of First National Bank P.O. Box 848 Huron, SD 57350 |
| Hansen Holdings, LLC 3229 S. Nic Ann Court Sioux Falls, SD 57103 | Great Western 106 E. 7th Avenue Redfield, SD 57469 |
| | Farmers & Merchants Branch of First National Bank P.O. Box 848 Huron, SD 57350 |
| Shirley Hansen 3229 S. Nic Ann Court Sioux Falls, SD 57103 | Wells Fargo Home Mortgage P.O. Box 10335 Des Moines, IA 50306-0335 |
| | Great Western 106 E. 7th Avenue Redfield, SD 57469 |
| | Farmers & Merchants Branch of First National Bank P.O. Box 848 Huron, SD 57350 |
| | |
| | |
| | |
| | |
| | |

Case: 14-10071 Document: 27 Filed: 05/29/14 Page 27 of 43

Fill in this information to identify your case:

4. Calculate gross income. Add line 2 + line 3.

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| Debtor 1 | Randal Kent Hanse | en | | | _ | | | |
|--------------------------------|----------------------------------------------------|--------------------------------------------------------------------------------------|--------------------------------------------|---------------|------------|---------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|-------------------------|
| 5 | First Name | Middle Name | Last Name | | _ | | | |
| Debtor 2 (Spouse, if filing | g) First Name | Middle Name | Last Name | | - | | | |
| United States | Bankruptcy Court for the: I | District of South Dakota | | | | | | |
| | | | | | | Chook if | thin in | |
| (If known) | 14-10071 | | - | | | Check if t | | |
| | | | | | | | nended filing | _ |
| | | | | | | | plement showing post-petitio er 13 income as of the followi | |
| Official | Form 6l | | | | | MM / [| DD/ YYYY | |
| Sche | dule I: You | ır Income | | | | | | 12/13 |
| supplying co | orrect information. If yo parated and your spou | ou are married and not fi use is not filing with you, top of any additional pa | ling jointly, and yo do not include inf | ur sp orma | ouse is | s living with y out your spo | or 2), both are equally responsi ou, include information about use. If more space is needed, a known). Answer every question | your spouse attach a |
| | | | | | | | | |
| 1. Fill in you | ur employment ion. | | Debtor 1 | | | | Debtor 2 or non-filing spo | ouse |
| If you hav | ve more than one job, | | | | | | | |
| attach a s | separate page with on about additional | Employment status | ✓ Employed □ Not employ | /ed | | | ✓ Employed □ Not employed | |
| | art-time, seasonal, or oyed work. | | Detiment | | | | Paris d | |
| | on may Include student naker, if it applies. | Occupation | Retired | | | | Retired | |
| | | Employer's name | Self-Employe | d | | | Self-Employed | |
| | | Employer's address | | | | | | |
| | | Zinpioyor o dadrooc | Number Street | | | | Number Street | |
| | | | | | | | | |
| | | | | | | | | |
| | | | - | | | | | |
| | | | City | Stat | e ZIF | P Code | City State | ZIP Code |
| | | Have lower ample to d th | , | | | | | |
| | | How long employed th | ere ? | - | | | | |
| Part 2: | Give Details About | : Monthly Income | | | | | | |
| | | | m. If you have noth | ing to | report | for any line, w | rite \$0 in the space. Include your | non-filing |
| If you or y | | | | ormati | on for a | all employers f | or that person on the lines | |
| 20.011.11 | , | | | | г. | or Dobtor 4 | For Dobtor 2 or | |
| | | | | | | or Debtor 1 | For Debtor 2 or non-filing spouse | |
| | | ary, and commissions (b calculate what the month | | 2. | \$ <u></u> | 0.00 | \$ <u>0.00</u> | |
| 3. Estimat | e and list monthly over | time pay. | | 3. | +\$_ | 0.00 | + \$ 0.00 | |

Official Form 6I Schedule I: Your Income page 1

4.

0.00

0.00

+ \$<u>0.00</u>

\$<u>0.00</u>

Document: 27 Filed: 05/29/14 Page 28 of 43

| | | For | Debtor 1 | | r Debtor 2 or n-filing spouse | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|---------|----------------|------------|----------------------------------|-------------------|
| Copy line 4 here | 4. | \$ | 0.00 | ; | \$ | |
| List all payroll deductions: | | | | | | |
| 5a. Tax, Medicare, and Social Security deductions | 5a. | \$ | 0.00 | 9 | 0.00 | |
| 5b. Mandatory contributions for retirement plans | 5b. | \$ | 0.00 | 9 | 0.00 | |
| 5c. Voluntary contributions for retirement plans | 5c. | \$ | 0.00 | | 0.00 | |
| 5d. Required repayments of retirement fund loans | 5d. | \$ | 0.00 | | 0.00 | |
| 5e. Insurance | 5e. | \$ | 0.00 | | 0.00 | |
| 5f. Domestic support obligations | 5f. | \$ | 0.00 | | | |
| • | | \$ | 0.00 | . , | | |
| 5g. Union dues | 5g. | · • | | . , | · | |
| 5h. Other deductions. Specify: | 5h. | +\$_ | 0.00 | + \$ | | |
| Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h. | 6. | \$ | 0.00 | \$ | 0.00 | |
| Calculate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 0.00 | 9 | 0.00 | |
| List all other income regularly received: | | | | | | |
| 8a. Net income from rental property and from operating a business, profession, or farm | | | | | | |
| Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$ | 0.00 | (| § 0.00 | |
| 8b. Interest and dividends | 8b. | \$ | 0.00 | 9 | 0.00 | |
| 8c. Family support payments that you, a non-filing spouse, or a depende regularly receive | nt | Ψ | | · | | |
| Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | \$ | 0.00 | Ş | <u>0.00</u> | |
| 8d. Unemployment compensation | 8d. | \$ | 0.00 | 9 | 0.00 | |
| 8e. Social Security | 8e. | \$ | 1,122.00 | 9 | 652.00 | |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistan that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | ce 8f. | \$ | 0.00 | 9 | 0.00 | |
| 8g. Pension or retirement income | 8g. | \$ | 0.00 | 9 | 522.37 | |
| 8h. Other monthly income. Specify: See Schedule Attached | 8h. | +\$ | 0.00 | +9 | 26,541.00 | |
| Add all other income . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. | 9. | \$ | 1,122.00 | | \$27,715.37 | |
| Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | \$ | 1,122.00 | + | \$27,715.37 | \$ <u>28,837.</u> |
| State all other regular contributions to the expenses that you list in Sched | lule J | | | | | |
| Include contributions from an unmarried partner, members of your household, y other friends or relatives. | | | ents, your roo | mmates | , and | |
| Do not include any amounts already included in lines 2-10 or amounts that are a Specify: | not av | ailable | to pay exper | nses liste | | + \$ 0.0 |
| Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Schedules and Statistical Summary of Co | | | | | come. | \$ 28,837. |
| Do you expect an increase or decrease within the year after you file this f | orm? | | | | | monthly incor |
| □ No. ✓ Yes. Explain: Increase in income of approx. \$40,000.00/year v | | | | | | |

IN RE Hansen, Randal Kent

____ Case No. 14-10071

Debtor(s)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

Continuation Sheet - Page 1 of 1

| | DEBTOR | SPOUSE |
|--------------------------------------------|--------|-----------|
| Other monthly income: | | |
| Income From Watching Grandkids | 0.00 | 41.00 |
| Potenial Income From Farming ?? | 0.00 | 0.00 |
| Misc. Income | 0.00 | 25,000.00 |
| Possible Rental Income From Property In A7 | 0.00 | 1 500 00 |

| Fill in this information to identify | your case: | | | |
|-----------------------------------------------------------------------------------------------------------------|---------------------------------------------------|----------------------------------|----------------------|-----------------------|
| Debtor 1 Randal Kent Hanse | | Check if this | ie: | |
| First Name Debtor 2 | Middle Name Last Name | _ | | |
| (Spouse, if filing) First Name | Middle Name Last Name | — ☐ An amen | • | t-petition chapter 13 |
| United States Bankruptcy Court for the: D | district of South Dakota | | s as of the followin | |
| Case number | | MM / DD / | YYYY | |
| (ii diomi) | | | | 2 because Debtor 2 |
| Official Form 6J | | maintain: | s a separate house | ehold |
| Schedule J: You | ur Expenses | | | 12/13 |
| Be as complete and accurate as po- information. If more space is neede (if known). Answer every question. | | | | _ |
| Part 18 Describe Your House | sehold | | | |
| 1. Is this a joint case? | | | | |
| ✓ No. Go to line 2.☐ Yes. Does Debtor 2 live in a second | eparate household? | | | |
| ☐ No ☐ Yes. Debtor 2 must file | e a separate Schedule J. | | | |
| 2. Do you have dependents? | ☑ No | Dependent's relationship to | Dependent's | Does dependent live |
| Do not list Debtor 1 and Debtor 2. | Yes. Fill out this information for each dependent | Debtor 1 or Debtor 2 | age | with you? |
| Do not state the dependents' | | | | □ No □ Yes |
| names. | | | | □ No |
| | | | | Yes |
| | | | | □ No |
| | | | | ∐ Yes |
| | | | | ☐ No ☐ Yes |
| | | | | ☐ No |
| | | | | Yes |
| 3. Do your expenses include expenses of people other than yourself and your dependents? | √ No □Yes | | | |
| Part 2: Estimate Your Ongoi | na Monthly Evnoncos | | | |
| Estimate your expenses as of your | | re using this form as a sunnlame | ent in a Chanter 13 | case to report |
| expenses as of a date after the band applicable date. | | • | • | • |
| Include expenses paid for with non- | -cash government assistance if you | know the value of | | |
| such assistance and have included | • | • | Your expe | enses |
| The rental or home ownership en any rent for the ground or lot. | xpenses for your residence. Include | first mortgage payments and | 4. \$2 | 2,222.00 |
| If not included in line 4: | | | | |
| 4a. Real estate taxes | | | 4a. \$ * | 1,000.00 |
| 4b. Property, homeowner's, or re | enter's insurance | | 4b. \$ | 300.00 |
| 4c. Home maintenance, repair, a | and upkeep expenses | | 4c. \$ | 300.00 |
| 4d. Homeowner's association or | condominium dues | | 4d. \$ | 0.00 |

Debtor 1 Randal Kent Hansen

First Name Middle Name

Last Name

Case number (if known) 14-10071

| | • | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|--------------------|
| Additional mortgage payments for your residence, such as home equity loans | 5. | \$ |
| Utilities: | | |
| 6a. Electricity, heat, natural gas | 6a. | \$ <u>250.00</u> |
| 6b. Water, sewer, garbage collection | 6b. | \$ <u>75.00</u> |
| 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ <u>106.00</u> |
| 6d. Other. Specify: See Schedule Attached | 6d. | \$ <u>500.00</u> |
| Food and housekeeping supplies | 7. | \$ <u>1,200.00</u> |
| Childcare and children's education costs | 8. | \$0.00 |
| Clothing, laundry, and dry cleaning | 9. | \$150.00 |
| Personal care products and services | 10. | \$50.00 |
| Medical and dental expenses | 11. | \$ |
| Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. | 12. | \$ |
| Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ 150.00 |
| Charitable contributions and religious donations | 14. | \$100.00 |
| Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| 15a. Life insurance | 15a. | \$ 0.00 |
| 15b. Health insurance | 15b. | \$ 0.00 |
| 15c. Vehicle insurance | 15c. | \$ 0.00 |
| 15d. Other insurance. Specify: | 15d. | \$ |
| Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. | | 0.00 |
| Specify: | 16. | \$0.00 |
| Installment or lease payments: | | |
| 17a. Car payments for Vehicle 1 | 17a. | \$0.00 |
| 17b. Car payments for Vehicle 2 | 17b. | \$0.00 |
| 17c. Other. Specify: Non Filing Spouse's Pymnt To Great Westerer | 17c. | \$\$21,070.41 |
| 17d. Other. Specify: | 17d. | \$ |
| Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). | m 18. | \$0.00 |
| Other payments you make to support others who do not live with you. | | \$0.00 |
| Specify: | 19. | |
| Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your In | ncome. | |
| 20a. Mortgages on other property | 20a. | \$ |
| 20b. Real estate taxes | 20b. | \$0.00 |
| 20c. Property, homeowner's, or renter's insurance | 20c. | \$0.00 |
| 20d. Maintenance, repair, and upkeep expenses | 20d. | \$0.00 |
| 20e. Homeowner's association or condominium dues | 20e. | \$\$ |

Debtor 1

Randal Kent Hansen

First Name Middle Name Last Name

Case number (if known) 14-10071

| 21. Other. Specify: | 21. | +\$ | 0.00 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|----------|-----------|
| 22. Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses. | 22. | \$ | 28,113.41 |
| 23. Calculate your monthly net income. 23a. Copy line 12 (<i>your combined monthly income</i>) from <i>Schedule I</i>. 23b. Copy your monthly expenses from line 22 above. | 23a. 23b. | \$ \$ | 28,837.37 |
| 23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> . | 23c. | \$ | 723.96 |
| 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? No. | | | |
| Possible decrease due to cutting expenses. | | | |

IN RE Hansen, Randal Kent Case No. 14-10071

Debtor(s)

${\bf SCHEDULE\ J\ -CURRENT\ EXPENDITURES\ OF\ INDIVIDUAL\ DEBTOR(S)}$

Continuation Sheet - Page 1 of 1

Other Utilities (DEBTOR)

Non Filing Spouse's Utilities For Home In Pierre, SD Non Filing Spouse's Utilities For Home In AZ

200.00 300.00

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Case No. 14-10071

Debtor(s)

(If known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of **33** sheets, and that they are true and correct to the best of my knowledge, information, and belief. Date: May 29, 2014 Signature: /s/ Randal Kent Hansen Debtor Randal Kent Hansen Signature: __ (Joint Debtor, if any) [If joint case, both spouses must sign.] DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110) I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section. Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer Social Security No. (Required by 11 U.S.C. § 110.) If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document. Address Signature of Bankruptcy Petition Preparer Date Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual: If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person. A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156. DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the ___ (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of ______ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.

(Print or type name of individual signing on behalf of debtor)

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Signature:

B22B (Official Form 22B) (Chapter 11) (12/10)

| In re: Hansen, Randal Kent | |
|------------------------------|------------|
| | Debtor(s) |
| Case Number: 14-10071 | |
| | (If known) |

CHAPTER 11 STATEMENT OF CURRENT MONTHLY INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 11 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

| | | Part I. CALCULAT | ION OF MONTHLY INCO | OME | | |
|---|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|-----------------------------|-----|--------------------------|--------------------------------|
| 1 | Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed. a. □ Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10. b. ☑ Married, not filing jointly. Complete only Column A ("Debtor's Income") for Lines 2-10. c. □ Married, filing jointly. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 2-10. | | | | | |
| | All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line. | | | | Column A Debtor's Income | Column B Spouse's Income |
| 2 | Gro | ss wages, salary, tips, bonuses, overtime, comn | nissions. | | \$ | \$ |
| | Net income from the operation of a business, profession, or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 3. If more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. | | | | | |
| 3 | a. Gross receipts \$ | | | | | |
| | b. | Ordinary and necessary business expenses | \$ | | | |
| | c. | Business income | Subtract Line b from Line a | | \$ | \$ |
| | Net rental and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. Do not enter a number less than zero. | | | | | |
| 4 | a. | Gross receipts | \$ |] | | |
| 4 | b. | Ordinary and necessary operating expenses | \$ | | | |
| | c. | Rent and other real property income | Subtract Line b from Line a | | \$ | \$ |
| 5 | 5 Interest, dividends, and royalties. | | | | \$ | \$ |
| 6 | | | | \$ | \$ | |
| 7 | Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by the debtor's spouse if Column B is completed. Each regular payment should be reported in only one column; if a payment is listed in Column A, do not report that payment in Column B. | | | \$ | \$ | |

B22B (Official Form 22B) (Chapter 11) (12/10)

| 8 | Unemployment compensation. Enter the However, if you contend that unemploy was a benefit under the Social Security Column A or B, but instead state the an | ment compensation received Act, do not list the amount | ed by you | or your spouse | | |
|----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------------------------------------|-----------------|-----------------|
| | Unemployment compensation claimed to be a benefit under the Social Security Act | Debtor \$ | Spouse | \$ | \$ | \$ |
| 9 | Income from all other sources. Specific sources on a separate page. Total and expanded and expan | nter on Line 9. Do not incl spouse if Column B is contempor payments received as a | ude alim npleted, clude any victim of | ony or separate but include all benefits a war crime, | \$ | \$ |
| 10 | Subtotal of current monthly income. completed, add Lines 2 through 9 in Co | | | d, if Column B is | \$ | \$ |
| 11 | Total current monthly income. If Colto Line 10, Column B, and enter the tot amount from Line 10, Column A. | umn B has been completed | l, add Lin | | \$ | · |
| | | Part II. VERIFICA | ATION | | | |
| | I declare under penalty of perjury that the both debtors must sign.) | he information provided in | this state | ement is true and co | orrect. (If thi | s a joint case, |
| 12 | Date: May 29, 2014 Sign | ature: /s/ Randal Kent Ha | nsen | (Debtor) | | |
| | Date: Sign | ature: | | (Joint Debtor, if any) | | |

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United States Bankruptcy Court District of South Dakota

| IN RE: | | Case No. 14-10071 |
|---------------------|-----------|-------------------|
| Hansen, Randal Kent | | Chapter 11 |
| | Debtor(s) | 1 |

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101(2),(31).

1. Income from employment or operation of business

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

0.00 2012 Joint return W-2 \$153,861 2012 Joint dividends. Sch. E \$29.979

2. Income other than from employment or operation of business

None State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

0.00 2012 income from joint pensions and annuities \$72,286

3. Payments to creditors

Complete a. or b., as appropriate, and c.

None

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| preceding the commencement of \$6,255.* If the debtor is an individual obligation or as part of an alternate debtors filing under chapter 12 of | f the case unless the aggregate value vidual, indicate with an asterisk (*) an tive repayment schedule under a plant | ayment or other transfer to any creditor of all property that constitutes or is afficy payments that were made to a creditor by an approved nonprofit budgeting and other transfers by either or both spoted.) | fected by such r r on account of credit counselin | transfer is less than a domestic support ng agency. (Married |
|-------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|--------------------------------------------------------------------|
| * Amount subject to adjustment | on 4/01/16, and every three years the | reafter with respect to cases commenced | on or after the | date of adjustment. |
| NAME AND ADDRESS OF CREDIT None Besides Normal Current Li Expense & Those Listed Below: | | OR | OUNT PAID VALUE OF RANSFERS 0.00 | AMOUNT STILL OWING 0.00 |
| Maurice Secarz | May 2014 | | 26,500.00 | 0.00 |
| who are or were insiders. (Marri | | preceding the commencement of this ca chapter 13 must include payments by eiterition is not filed.) | | |
| 4. Suits and administrative proceeding | ngs, executions, garnishments and a | ttachments | | |
| bankruptcy case. (Married debto | | s or was a party within one year imme 13 must include information concerning at petition is not filed.) | | |
| CAPTION OF SUIT AND CASE NUMBER Greg Krech, et. al vs. Debtor / Civ. #14 | NATURE OF PROCEEDING Collection | COURT OR AGENCY AND LOCATION Circuit Court, Second Judicia Circuit, Minnehaha County | STATUS DISPOSI Pending | TION |
| Securities and Exchange Commission vs. Debtor / 13-cv- 01403-VSB | Collection | District Court, Southern Discr of New York | ric Pending | |
| Reginald Martin vs. Debtor / Civ. #13-3223 | Collection | Circuit Court, Second Judicia Circuit, Minnehaha County | | |
| United States of America vs. Debtor / CR 13-40053 | Collection | District Court, District of Sou Dakota, Southern District | th Pending | |
| Dietmar Rose, et al.vs. Debtor / 13-CV-05804 | Collection | District Court, Southern Distr of New York | ict Pending | |
| Michael Miller vs. Debtor / Civ. #12-4036 | Collection | District Court, District of Sou Dakota, Southern Division | th Pending | |
| the commencement of this case. | (Married debtors filing under chapte | der any legal or equitable process within 12 or chapter 13 must include informations are separated and a joint petition is | ation concernin | |

5. Repossessions, foreclosures and returns

None List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

6. Assignments and receiverships

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and joint petition is not filed.)

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

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7. Gifts None List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.) NAME AND ADDRESS OF PERSON RELATIONSHIP TO DESCRIPTION AND OR ORGANIZATION DEBTOR, IF ANY DATE OF GIFT VALUE OF GIFT Misc. Charities & Churches None within the last \$1,200 year 8. Losses None List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.) 9. Payments related to debt counseling or bankruptcy None List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case. DATE OF PAYMENT, NAME OF AMOUNT OF MONEY OR DESCRIPTION NAME AND ADDRESS OF PAYEE PAYOR IF OTHER THAN DEBTOR AND VALUE OF PROPERTY See Attorney's Disclosure Statement Allen Credit and Debt Counseling Agency May 10, 2014 20.00 10. Other transfers a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.) NAME AND ADDRESS OF TRANSFEREE, DESCRIBE PROPERTY TRANSFERRED RELATIONSHIP TO DEBTOR DATE AND VALUE RECEIVED **Shirley Hansen** April 2014 Debtor sold his shares in Hansen 3229 S. Nic Ann Court Securities & Hansen Management / Sioux Falls, SD 57103 \$5,600 - used for attorney's fees, Spouse accounting fees & living expenses 1/2 interest in real property located in Shirley Hansen April 2014 3229 S. Nic Ann Court Pierre. SD/ \$65.000 - used for Sioux Falls, SD 57103 attorney's fees, accounting fees & **Spouse** living expenses March 2014 **Shirley Hansen** Salt Water Well / \$9,000 3229 S. Nic Ann Court Sioux Falls, SD 57103 **Spouse** March 2014 **Shirley Hansen** Ridgewood Oil / \$6,000 3229 S. Nic Ann Court Sioux Falls, SD 57103 **Spouse Shirley Hansen** March 2014 Stock in Redfield Energy / \$25,000 -3229 S. Nic Ann Court used for attorney's fees, accounting Sioux Falls, SD 57103 fees & living expenses Spouse **Shirley Hansen** March 2014 Glacial Lakes stock / \$10,775 - used 3229 S. Nic Ann Court for attorney's fees, etc. Sioux Falls, SD 57103 **Spouse** Sam Leinan March 2014 shotgun & pistol / \$675.00 - used for Son-in-law living expenses

April 2014

Debtor's 1/2 interest in homestead

located in Sioux Falls, SD /

Inc. [1-800-998-2424] - Forms Software Only

Shirley Hansen

3229 S. Nic Ann Court

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Sioux Falls, SD 57103 Spouse

Mortgage assumed, no equity

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

11. Closed financial accounts

None List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

12. Safe deposit boxes

None List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

13. Setoffs

None List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER **Non Filing Spouse**

DESCRIPTION AND VALUE OF PROPERTY All household goods & furnishings not listed on Schedules B; clothes, etc. /

LOCATION OF PROPERTY **Debtor's residence**

15. Prior address of debtor

If debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

16. Spouses and Former Spouses

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

18. Nature, location and name of business

a. If the debtor is an individual, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS

OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. NATURE OF **BEGINNING AND ADDRESS ENDING DATES NAME** (ITIN)/COMPLETE EIN **BUSINESS** H Family, Inc. 20-4164367 3229 S. Nic Ann Court **Farming** Approx. 2006 -Sioux Falls, SD 57103 current Hansen Management, LLC 26-1258213 3229 S. Nic Ann Court Farm 2008-current (will Management Sioux Falls, SD 57103 be dissolving) company Hansen Rentals, LLC 27-0618452 3229 S. Nic Ann Court Rental company Approx. 2011 -Sioux Falls, SD 57103 current **RAHFCO Management Gorup** 37-1534907 3229 S. Nic Ann Court Investements 2007-2011 Sioux Falls, SD 57103 Solar Management, LLC 3591 3229 S. Nic Ann Court Solar 2008-current Sioux Falls, SD 57103 investment **Hansen Securities** 27-0618700 3229 S. Nic Ann Court 2008-2014 (will Investment Sioux Falls, SD 57103 be dissolving)

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

 \checkmark

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within the six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

a. List all bookkeepers and accountants who within the two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

H. Family, Inc.

Hansen Management, LLC

Hansen Rentals, LLC

RAHFCO Management Group

Solar Management, LLC

DATES SERVICES RENDERED

Debtor kept books; CPA prepared tax returns

Company

Debtor kept books; CPA prepared tax returns

Hansen Securities

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

None d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within the **two years** immediately preceding the commencement of this case.

20. Inventories

None a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

None b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

21. Current Partners, Officers, Directors and Shareholders

None a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

22. Former partners, officers, directors and shareholders

None a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

23. Withdrawals from a partnership or distributions by a corporation

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

24. Tax Consolidation Group

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

25. Pension Funds.

None If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

| Signature /s/ Randal Kent Hansen | |
|--------------------------------------|-----------------------------------------------|
| of Debtor | Randal Kent Hansen |
| Signature | |
| of Joint Debtor | |
| (if any) | |
| 0 continuation pages attached | |
| | of Debtor Signature of Joint Debtor (if any) |

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.